BEST AVAILABLE COPY

Application or Docket Number

	PAIENIA	Effect	ive Octob	0982671.									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			32.				RATE		FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			スタ _minus 20=		. 12.		X\$ 9	9=		OR	X\$18=	211	
INDEPENDENT CLAIMS			/0 _ minus 3 =		· - 7		X40)=		OR	X80=	216 i oo	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				+13!	=			+270=	560·0	י
* If	the difference	in column 1 is	less than zero, enter "0" i					o= AL		OR OR	TOTAL	4000	
CLAIMS AS AMENDED - PART II								AL	L	UN	OTHER	<i>/486.</i> THAN	10
(Column 1) (Column 2) (Column 3)								LL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X40)=		OR	X80=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+13!	 5=		OR	+270=		
TOT										OB	TOTAL		
		(Column-1)		(Colu	mn 2)	(Column 3)	ADDIT.	FEE	L]	ADDIT. FEE		
AMENDMENT B	•	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	İ
	Total	*	Minus	**		=	X\$ 9	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X40)=		OR	X80=		ł
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN	CLAIM		10			1	+270=		
+135= OR										TOTAL		ļ	
								FEE		OR	ADDIT. FEE		
_		(Column 1) CLAIMS	1		mn 2) HEST	(Column 3)	_			1	_	1 4551	
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER OUSLY FOR	PRESENT EXTRA	RA1	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	ļ
	Total	*	Minus	**		=	X\$ 9	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X40)=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1	1070		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										+270= TOTAL			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.